



The NSDUH Report

August 7, 2014

Workplace Policies and Programs Concerning Alcohol and Drug Use

In Brief

- **Combined 2008 to 2012 National Survey on Drug Use and Health (NSDUH) data indicate that 81.4 percent of full-time workers aged 18 to 64 worked for an employer with a written policy about employee use of alcohol and drugs use, 59.5 percent had access to an employee assistance program (EAP) at work, and 44.7 percent reported that their employer had given them educational materials regarding the use of alcohol and illicit drugs.**
- **Full-time workers aged 18 to 64 who used illicit drugs in the past month were generally less likely than those who did not use illicit drugs in the past month to work for an employer with a written policy about employee use of alcohol and drugs. Similarly, full-time workers who drank heavily in the past month were less likely than those who did not drink heavily to have an employer that provided these workplace policies and programs.**
- **There were small but statistically significant increases in the percentage of full-time workers aged 18 to 64 reporting working for an employer who provided these workplace policies and programs between 2003-2007 and 2008-2012.**

Workplace substance use policies and programs benefit both employers and employees. They promote the health and well-being of employees, while reducing behaviors that could negatively affect the quality of work and performance of employees.¹ Substance use can result in lost productivity, workplace accidents and injuries, employee absenteeism, low morale, and increased illness.¹ Studies also have indicated that employers vary in their responses to employees with substance use issues and that workplace-based employee assistance programs (EAPs) can be a valuable resource for obtaining help for substance-using workers.^{2,3}

The National Survey on Drug Use and Health (NSDUH) gathers information about substance use. NSDUH defines illicit drugs as marijuana/hashish, cocaine (including crack), inhalants, hallucinogens, heroin, or prescription-type drugs used nonmedically. Heavy alcohol use is defined as drinking five or more drinks on the same occasion (i.e., at the same time or within a couple of hours of each other) on 5 or more days in the past 30 days. NSDUH respondents are also asked about three types of workplace policies and programs: (1) whether their employer has given them any educational materials regarding the use of alcohol and illicit drugs, (2) whether their workplace has a written policy about employee use of alcohol and drugs, and (3) whether they have access to any type of EAP or other type of counseling program through their workplace for employees who have alcohol- or drug-related problems.⁴

This report is one of several designed to update and expand upon information presented in Substance Abuse and Mental Health Services Administration (SAMHSA) Analytic Series A-29, *Worker Substance Use and Workplace Policies and Programs*, published in 2007.⁵ To enhance the statistical power and analytic capability and to ensure consistency in time frames across all of the updated reports, 5-year time periods were chosen. This issue of *The NSDUH Report* uses data from the combined 2008 to 2012 NSDUHs to present estimates of full-time workers aged 18 to 64 who worked for an employer who provided workplace policies and programs. Estimates are presented for all full-time workers, and comparisons are made between full-time workers who engaged in substance use and those who did not.⁶ The final section of this report presents comparisons of combined 2008 to 2012 data (hereafter "2008-2012 data") to combined 2003 to 2007 data (hereafter "2003-2007 data").

Workplace Policies and Programs

Combined 2008-2012 NSDUH data indicate that 81.4 percent of full-time workers aged 18 to 64 worked for an employer with a written policy about employee use of alcohol and drugs, and 59.5 percent had access to an EAP at work (Figure 1). An estimated 44.7 percent of full-time workers reported that their employer had given them educational materials regarding the use of alcohol and illicit drugs.

Figure 1. Workplace Provides Educational Information, Written Policy, or Employee Assistance Program Concerning Drug or Alcohol Use among Full-Time Workers Aged 18 to 64, by Gender: Annual Averages, 2008-2012

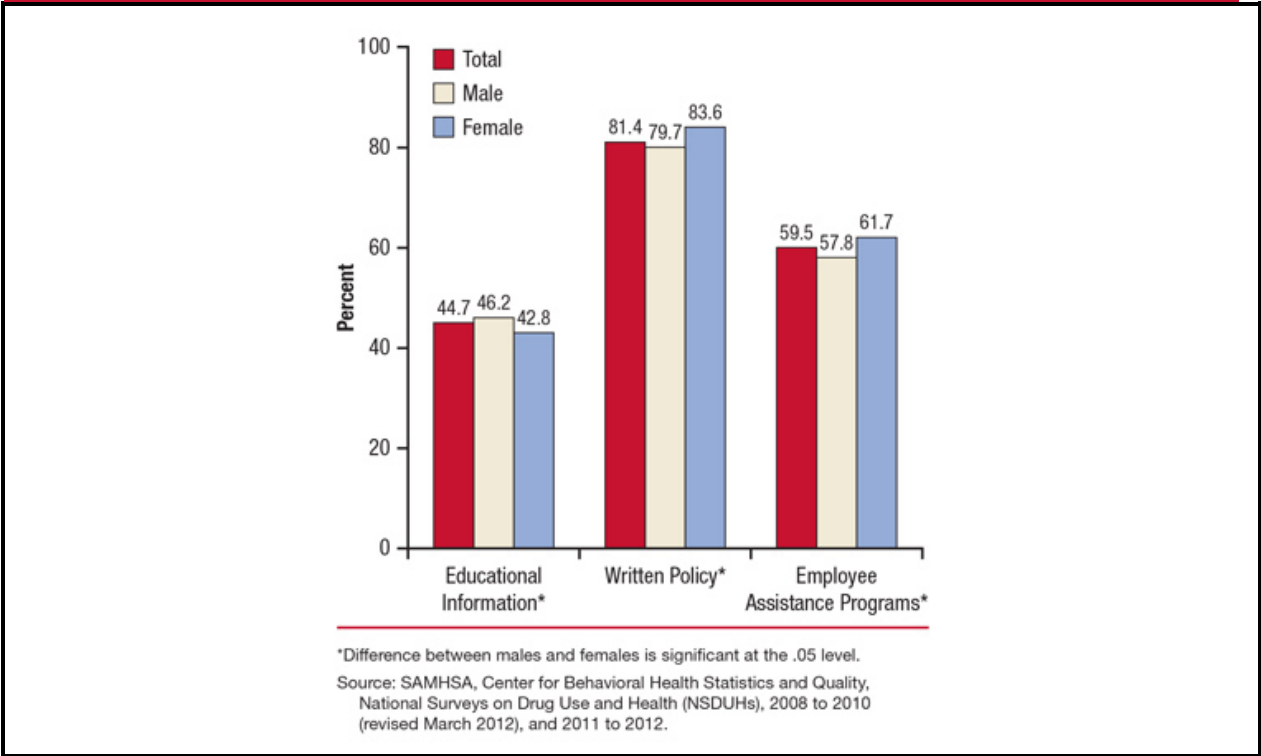


Figure 1 Table. Workplace Provides Educational Information, Written Policy, or Employee Assistance Program Concerning Drug or Alcohol Use among Full-Time Workers Aged 18 to 64, by Gender: Annual Averages, 2008-2012

Policy or Program	Total	Male	Female
Educational Information*	44.7%	46.2%	42.8%
Written Policy*	81.4%	79.7%	83.6%
Employee Assistance Programs*	59.5%	57.8%	61.7%

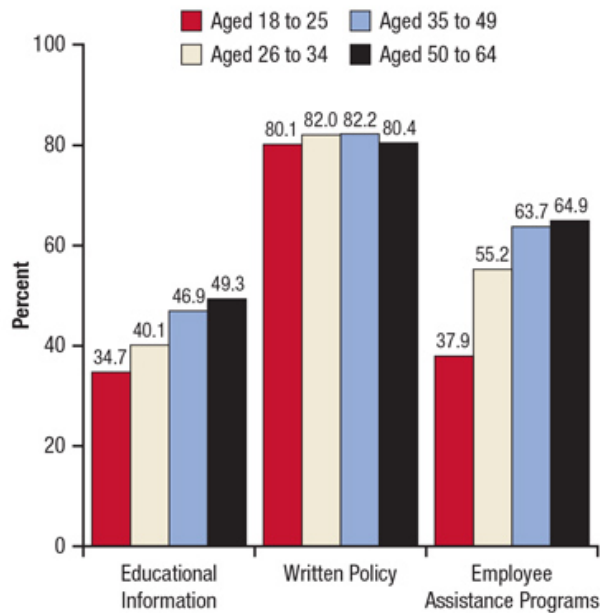
*Difference between males and females is significant at the .05 level.
Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Surveys on Drug Use and Health (NSDUHs), 2008 to 2010 (revised March 2012), and 2011 to 2012.

Female workers were more likely than male workers to report working for an employer who provided substance use programs and policies. Specifically, female workers were more likely to have worked for an employer with a written policy about employee use of alcohol and drugs (83.6 vs. 79.7 percent) and to report access to an EAP at work (61.7 vs. 57.8 percent) (Figure 1). However, male workers were more likely than female workers to indicate that they had received educational information from their employer (46.2 vs. 42.8 percent).

Workers in the youngest age group were generally less likely than older workers to report working for an employer who provided substance use programs and policies. Specifically, workers aged 18 to 25 were less likely to have worked for an employer with a written policy about employee use of alcohol and drugs than those aged 26 to 34 or those aged 35 to 49 (Figure 2). Compared with workers in the other age groups, those aged 18 to 25 were also less likely to have had access to an EAP at work. Across age groups, older workers were more likely than younger workers to report that their employer had given them educational information regarding substance use.

Figure 2. Workplace Provides Educational Information, Written Policy, or Employee Assistance Program Concerning Drug or Alcohol Use among Full-Time Workers Aged 18 to 64, by Age Group: Annual Averages, 2008-2012





Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Surveys on Drug Use and Health (NSDUHs), 2008 to 2010 (revised March 2012), and 2011 to 2012.

Figure 2 Table. Workplace Provides Educational Information, Written Policy, or Employee Assistance Program Concerning Drug or Alcohol Use among Full-Time Workers Aged 18 to 64, by Age Group: Annual Averages, 2008-2012

Policy or Program	Aged 18 to 25	Aged 26 to 34	Aged 35 to 49	Aged 50 to 64
Educational Information	34.7%	40.1%	46.9%	49.3%
Written Policy	80.1%	82.0%	82.2%	80.4%
Employee Assistance Programs	37.9%	55.2%	63.7%	64.9%

Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Surveys on Drug Use and Health (NSDUHs), 2008 to 2010 (revised March 2012), and 2011 to 2012.

Workplace Policies and Programs, by Substance Use Status

Among full-time workers aged 18 to 64 who used illicit drugs in the past month, 73.5 percent worked for an employer with a written policy about employee use of alcohol and drugs (Figure 3). Nearly one third (31.5 percent) with past month illicit drug use received educational information about alcohol and drug use from their employer, and 44.2 percent worked for an employer who maintained an EAP or other type of counseling program for employees who have an alcohol- or drug-related problem. Among workers who drank heavily in the past month, 77.8 percent worked for an employer with a written policy about employee use of alcohol and drugs. In addition, 39.2 percent of those with past month heavy drinking worked for an employer who provided educational information about alcohol and drug use, and 53.1 percent worked for an employer who maintained an EAP.

Figure 3. Workplace Provides Educational Information, Written Policy, or Employee Assistance Program Concerning Drug or Alcohol Use among Full-Time Workers Aged 18 to 64, by Past Month Illicit Drug Use and Past Month Heavy Alcohol Use: Annual Averages, 2008-2012

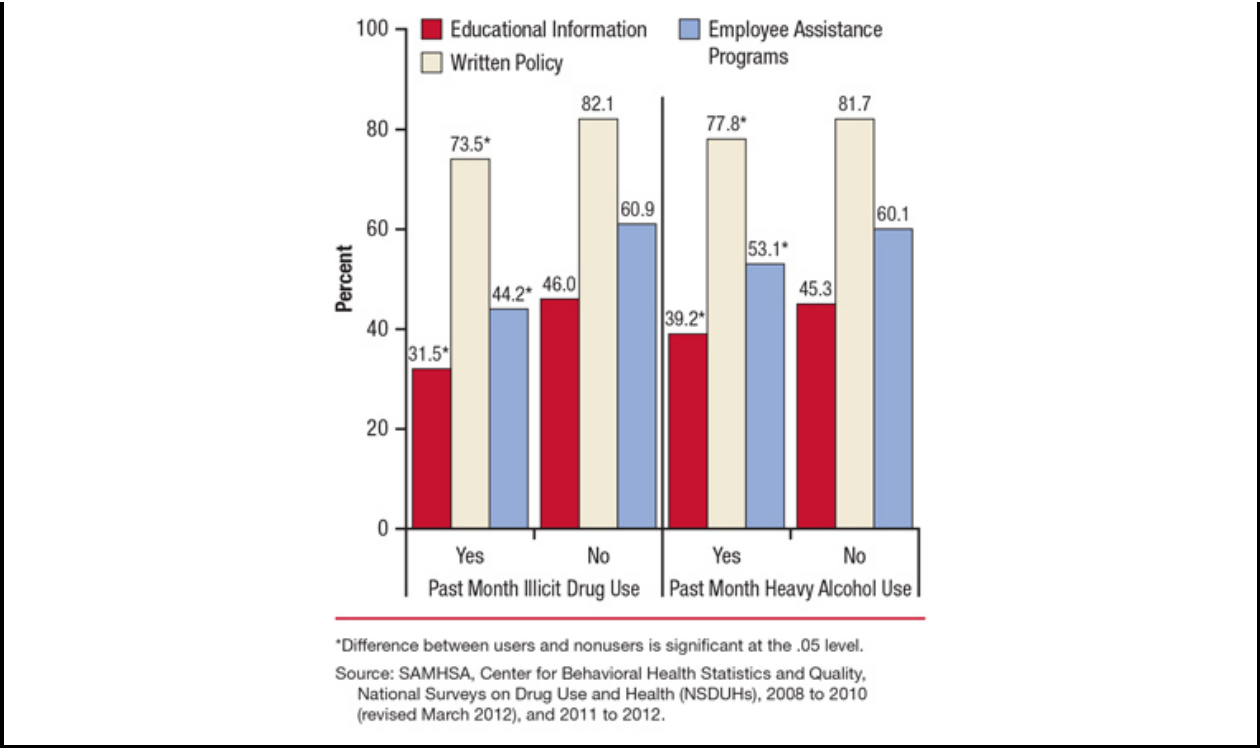


Figure 3 Table. Workplace Provides Educational Information, Written Policy, or Employee Assistance Program Concerning Drug or Alcohol Use among Full-Time Workers Aged 18 to 64, by Past Month Illicit Drug Use and Past Month Heavy Alcohol Use: Annual Averages, 2008-2012

Policy or Program	Past Month Illicit Drug Use		Past Month Heavy Alcohol Use	
	Yes	No	Yes	No
Educational Information	31.5%*	46.0%	39.2%*	45.3%
Written Policy	73.5%*	82.1%	77.8%*	81.7%
Employee Assistance Programs	44.2%*	60.9%	53.1%*	60.1%

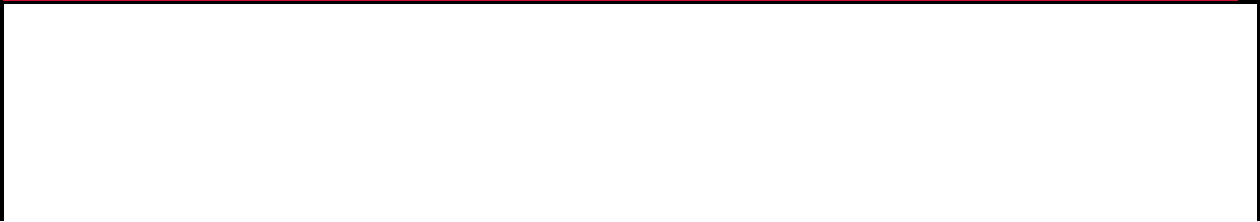
*Difference between users and nonusers is significant at the .05 level.
Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Surveys on Drug Use and Health (NSDUHs), 2008 to 2010 (revised March 2012), and 2011 to 2012.

Full-time workers aged 18 to 64 who used illicit drugs in the past month were less likely to have worked for an employer who provided the three types of workplace policies and programs. Similarly, full-time workers who drank heavily in the past month were less likely to have worked for an employer who provided the three types of workplace policies and programs than those who did not drink heavily.

Trends in Workplace Policies and Programs

Comparisons between 2003-2007 and 2008-2012 NSDUH data show small but generally statistically significant increases in the percentage of employees who reported working for an employer who provided workplace policies and programs (Figure 4). The percentage of full-time workers aged 18 to 64 who worked for an employer with a written policy about employee use of alcohol and drugs increased for workers in all age groups and for both male and female workers (see Table S1). In addition, among male full-time workers aged 18 to 64, there was a significant increase in reporting the provision of educational information or presence of an EAP.

Figure 4. Workplace Provides Educational Information, Written Policy, or Employee Assistance Program Concerning Drug or Alcohol Use among Full-Time Workers Aged 18 to 64: Annual Averages, 2003-2007 and 2008-2012



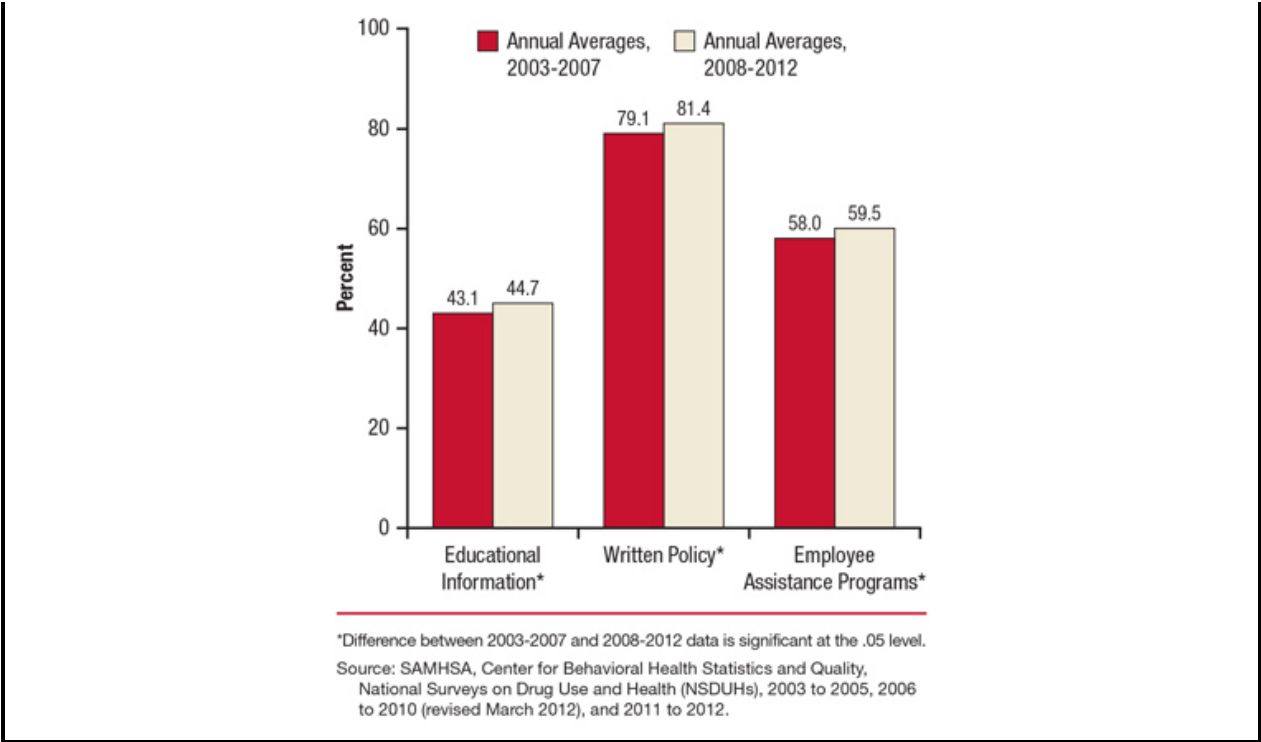


Figure 4 Table. Workplace Provides Educational Information, Written Policy, or Employee Assistance Program Concerning Drug or Alcohol Use among Full-Time Workers Aged 18 to 64: Annual Averages, 2003-2007 and 2008-2012

Policy or Program	Annual Averages, 2003 to 2007	Annual Averages, 2008 to 2012
Educational Information ¹	43.1%	44.7%
Written Policy ¹	79.1%	81.4%
Employee Assistance Programs ¹	58.0%	59.5%

¹Difference between 2003-2007 and 2008-2012 data is significant at the .05 level.
Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Surveys on Drug Use and Health (NSDUHs), 2003 to 2005, 2006 to 2010 (revised March 2012), and 2011 to 2012.

Comparisons between 2003-2007 and 2008-2012 NSDUH data also show few statistically significant changes in workplace policies and programs among workers who use substances (see Table S2). Specifically, among full-time workers aged 18 to 64 who drank heavily in the past month, there was a small but statistically significant increase in the percentage who worked for an employer with a written policy about employee use of alcohol and drugs (75.0 to 77.8 percent); similarly, a parallel small but statistically significant increase was seen among those who used illicit drugs in the past month (70.3 to 73.5 percent). No changes were seen in the provision of educational information or presence of an EAP. In contrast, among full-time workers who did not use illicit drugs in the past month, there were small but statistically significant increases in the percentage who worked for an employer who provided the three types of workplace policies and programs. Among workers who had not drunk alcohol heavily in the past month, there were also small but significant increases in the percentages of those who worked for an employer that provided these programs and policies between the two time periods.

Discussion

Because substance use is a health risk for employees and can also be detrimental to employers, reducing alcohol and illicit drug use is a health goal for many employers. The findings in this report suggest that the percentage of full-time workers who worked for employers who provided substance use-related policies and programs has improved slightly. However, workers aged 18 to 25 were less likely to be aware of the EAP at their workplace than older workers, even though adults aged 18 to 25 have higher substance use rates than older adults.⁷ Given the lifetime health and economic burden from illicit drug and alcohol use,^{8,9} this report illustrates the need for ongoing efforts to promote workplace-based substance use policies and programs and to monitor changes in awareness of these programs by employees over time. For more information about drug-free workplace programs, visit <http://www.workplace.samhsa.gov/>.

End Notes

¹ Office of the Assistant Secretary for Policy, Drug-Free Workplace Advisor. (2014). *Workplace impact*. Retrieved from <http://www.dol.gov/elaws/asp/drugfree/drugs/employee/screen73.asp>

² Delaney, W., Grube, J. W., & Ames, G. M. (1998). Predicting likelihood of seeking help through the employee assistance program among salaried and union hourly employees. *Addiction*, 93(3), 399-410.

³ Reynolds, G. S., & Lehman, W. E. (2003). Levels of substance use and willingness to use the Employee Assistance Program. *Journal of Behavioral Health Services & Research*, 30(2), 238-248.

⁴ Respondents with missing data or who responded "don't know" were excluded from analysis. For combined 2008-2012 data, 4.6 percent of respondents were excluded from the analysis of the educational information item, 3.7 percent were excluded from the written policy item, and 10.6 percent were excluded from the EAP item. For combined 2003-2007 data, the percentages excluded were 4.5, 3.8, and 9.9 percent, respectively.

⁵ Substance Abuse and Mental Health Services Administration. (2007). *Worker substance use and workplace policies and programs* (Analytic Series A-29). Retrieved from <http://www.samhsa.gov/data/work2k7/work.pdf>

⁶ Questions on illicit drug and alcohol use in NSDUH do not ask about use on the job; use could have occurred at any time or place in the past month.

⁷ Center for Behavioral Health Statistics and Quality. (2013). *Results from the 2012 National Survey on Drug Use and Health: Summary of national findings* (HHS Publication No. SMA 13-4795, NSDUH Series H-46). Rockville MD: Substance Abuse and Mental Health Services Administration.

⁸ Robert Wood Johnson Foundation. (2001, February). *Substance abuse: The nation's number one health problem*. Retrieved from <http://www.rwjf.org/content/dam/farm/reports/reports/2001/rwjf13550>

⁹ Cartwright, W. S. (2008). Economic costs of drug abuse: financial, cost of illness, and services. *Journal of Substance Abuse Treatment*, 34(2), 224-233.

Suggested Citation

Substance Abuse and Mental Health Services Administration, Center for Behavioral Health Statistics and Quality. (August 7, 2014). *The NSDUH Report: Workplace Policies and Programs Concerning Alcohol and Drug Use*. Rockville, MD.

The Substance Abuse and Mental Health Services Administration (SAMHSA) is the agency within the U.S. Department of Health and Human Services that leads public health efforts to advance the behavioral health of the nation. SAMHSA's mission is to reduce the impact of substance abuse and mental illness on America's communities.

The National Survey on Drug Use and Health (NSDUH) is an annual survey sponsored by SAMHSA. The 2008 to 2012 data used in this report are based on information obtained from 111,500 adults aged 18 to 64 who were full-time workers; 2003 to 2007 data are based on information from 123,100 adults aged 18 to 64 who were full-time workers. The survey collects data by administering questionnaires to a representative sample of the population through face-to-face interviews at their place of residence.

The NSDUH Report is prepared by the Center for Behavioral Health Statistics and Quality (CBHSQ), SAMHSA, and by RTI International in Research Triangle Park, North Carolina. (RTI International is a trade name of Research Triangle Institute.)

Information on the most recent NSDUH is available in the following publication:

Center for Behavioral Health Statistics and Quality. (2013). *Results from the 2012 National Survey on Drug Use and Health: Summary of national findings* (HHS Publication No. SMA 13-4795, NSDUH Series H-46). Rockville MD: Substance Abuse and Mental Health Services Administration.

Also available online: <http://www.samhsa.gov/data/>.

Supporting Tables

Table S1. Workplace Provides Educational Information, Written Policy, or Employee Assistance Program Concerning Drug or Alcohol Use among Full-Time Workers Aged 18 to 64, by Demographic Characteristics: Annual Averages, 2003-2007 and 2008-2012 (Supports Figure 1, 2, and 4)						
Demographic Characteristic	Combined 2003-2007			Combined 2008-2012		
	Number (in thousands)	Percent	Standard Error of Percent	Number (in thousands)	Percent	Standard Error of Percent
Educational Information						
Total	48,078	43.1%	0.25	48,261	44.7% _*	0.26
Male	28,165	43.6%	0.32	28,499	46.2% _*	0.35
Female	19,913	42.3%	0.35	19,761	42.8%	0.37
Aged 18 to 25	4,782	32.7%	0.27	4,383	34.7% _*	0.32
Aged 26 to 34	9,118	38.6%	0.44	9,193	40.1% _*	0.46
Aged 35 to 49	20,802	46.1%	0.36	19,215	46.9%	0.38
Aged 50 to 64	13,376	47.4%	0.64	15,469	49.3% _*	0.62
Written Policy						
Total	88,842	79.1%	0.19	88,646	81.4% _*	0.21
Male	50,026	76.7%	0.27	49,743	79.7% _*	0.29
Female	38,816	82.3%	0.27	38,903	83.6% _*	0.27
Aged 18 to 25	11,254	77.1%	0.26	10,052	80.1% _*	0.27
Aged 26 to 34	18,900	79.9%	0.36	18,844	82.0% _*	0.39

Aged 35 to 49	36,599	80.3%	0.28	34,146	82.2%*	0.29
Aged 50 to 64	22,090	77.5%	0.53	25,604	80.4%*	0.50
Employee Assistance Program						
Total	60,994	58.0%	0.25	60,116	59.5%*	0.28
Male	34,356	56.2%	0.33	33,481	57.8%*	0.36
Female	26,638	60.4%	0.36	26,636	61.7%*	0.39
Aged 18 to 25	5,048	38.8%	0.32	4,213	37.9%*	0.35
Aged 26 to 34	12,052	55.0%	0.48	11,545	55.2%	0.51
Aged 35 to 49	26,931	62.6%	0.35	24,744	63.7%*	0.39
Aged 50 to 64	16,962	62.2%	0.61	19,614	64.9%*	0.60

Note: Numbers for each category may not sum to total due to rounding.

*Difference between 2003-2007 and 2008-2012 data is significant at the .05 level.

Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Surveys on Drug Use and Health (NSDUHs), 2003 to 2005, 2006 to 2010 (revised March 2012), and 2011 to 2012.

Table S2. Workplace Provides Educational Information, Written Policy, or Employee Assistance Program Concerning Drug or Alcohol Use among Full-Time Workers Aged 18 to 64, by Past Month Illicit Drug Use and Past Month Heavy Alcohol Use: Annual Averages, 2003-2007 and 2008-2012 (Supports Figure 3)

Demographic Characteristic	Combined 2003-2007			Combined 2008-2012		
	Number (in thousands)	Percent	Standard Error of Percent	Number (in thousands)	Percent	Standard Error of Percent
Educational Information						
Past Month Illicit Drug Use ^a	3,007	31.2%	0.66	2,948	31.5%	0.67
No Past Month Illicit Drug Use ^a	45,071	44.2%	0.26	45,313	46.0%*	0.28
Past Month Heavy Alcohol Use ^b	3,765	37.5%	0.69	3,735	39.2%	0.74
No Past Month Heavy Alcohol Use ^b	44,314	43.7%	0.26	44,526	45.3%*	0.28
Written Policy						
Past Month Illicit Drug Use ^a	6,711	70.3%	0.66	6,852	73.5%*	0.71
No Past Month Illicit Drug Use ^a	82,131	79.9%	0.20	81,794	82.1%*	0.22
Past Month Heavy Alcohol Use ^b	7,555	75.0%	0.60	7,409	77.8%*	0.65
No Past Month Heavy Alcohol Use ^b	81,288	79.5%	0.20	81,237	81.7%*	0.22
Employee Assistance Program						
Past Month Illicit Drug Use ^a	3,964	44.3%	0.75	3,821	44.2%	0.79
No Past Month Illicit Drug Use ^a	57,030	59.2%	0.26	56,295	60.9%*	0.29
Past Month Heavy Alcohol Use ^b	4,867	51.9%	0.73	4,698	53.1%	0.81
No Past Month Heavy Alcohol Use ^b	56,126	58.6%	0.26	55,418	60.1%*	0.29

* Difference between 2003-2007 and 2008-2012 data is significant at the .05 level.

^a Illicit drugs include marijuana/hashish, cocaine (including crack), heroin, hallucinogens, inhalants, or prescription-type psychotherapeutics used nonmedically.

^b Heavy alcohol use is defined as drinking five or more drinks on the same occasion on each of 5 or more days in the past 30 days.

Source: SAMHSA, Center for Behavioral Health Statistics and Quality, National Surveys on Drug Use and Health (NSDUHs), 2003 to 2005, 2006 to 2010 (revised March 2012), and 2011 to 2012.